VENDOR PERMIT FOR OPERATION Department of Natural Resources/Division of Forestry



State Form 50717 (12-01)

To be completed by property personnel.

The Department of Natural Resources, herein called the Department, in consideration of the covenants and representations made herein by the Permittee, hereby grants to:

Name of Business					
Telephone		_			
Address				_	
				_	
City, State, Zip+4		,		_	
Will sell the followi	ng:				
At:				_	
for the period of			to		

The Permittee shall give the business his/her personal supervision and operate his/her business under this permit in accordance with all laws, rules and regulations of the State applicable to the Department, and will establish, maintain and operate in such manner as required to provide accommodations and standards prevailing for a similar business.

The Permittee shall attach a copy of his/her Public Liability Insurance showing the Department as a certificate holder (the policy limits of which shall be a minimum of a combined single limit coverage for bodily injury or property damage of \$300,000.00), as required by the Department to cover his/her liability for injury to persons and/or damage to property in the operation of his/her business, including the operation of automotive equipment.

The Permittee agrees not to discriminate against any employee because of his race, color, religion, sex, handicap or national origin pursuant to I.C. 22-9-1-10.

Upon failure of the Permittee to comply with any provision, stipulation or condition herein contained, this permit may be cancelled and terminated at the option of the Department.

This statement contains the entire agreement and all representations of the parties hereto, and no modifications or additions made subsequent to the date of this permit shall be valid and binding on the Department unless made in writing and signed by an officer there duly authorized.

SEAL STATE OF THE SEAL STATE O

VENDOR PERMIT FOR OPERATION

Department of Natural Resources/Division of Forestry

State Form 50717 (12-01)

To be completed by property personnel.

Page 2

I hereby accept the within permit and expressly agree contained.	to comply with all of the terms and conditions therein
Signature of Permittee	Date
DEPARTMENT OF NATURAL RESOURCES:	
Property Manager	Date
Dir. of Inns & Concessions	Date
State Forester	Date

Original to be returned to: Vendor

Copies to: Property Manager, Central Office